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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875  |   |   |   |  |                  |   | Application or Docket Number<br>10/533,772 |                        |    | ing Date<br>22/2006   | To be Mailed           |
|--|---|---|---|--|------------------|---|--|------------------------|----|-----------------------|------------------------|
| APPLICATION AS FILED – PART I<br>(Column 1) (Column 2)   |   |   |   |  |                  |   | SMALL ENTITY                               |                        |    |                       | HER THAN<br>ALL ENTITY |
| FOR  |   |   | NUMBER FI                               | LED NU   | NUMBER EXTRA     |   | RATE (\$)                                  | FEE (\$)               | П  | RATE (\$)             | FEE (\$)               |
| BASIC FEE<br>(37 CFR 1 16(a), (b), or (c))   |   |   | N/A                                     |  | N/A              |   | N/A  |                        | ]  | N/A                   |                        |
| SEARCH FEE<br>(37 CFR 1 16(k), (i), or (m))  |   |   | N/A                                     |  | N/A              |   | N/A  |                        | ]  | N/A                   |                        |
| EXAMINATION FEE<br>(37 CFR 1 16(o), (p), or (q))   |   |   | N/A                                     |  | N/A              |   | N/A  |                        |    | N/A                   |                        |
| TOTAL CLAIMS<br>(37 CFR 1 16(i))   |   |   | minus 20 = *                            |  |                  | l | x \$ =                                     |                        | OR | x s =                 |                        |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))   |   |   | minus 3 = *                             |  |                  | 1 | X \$ =                                     |                        | 1  | X 8 =                 |                        |
|  | APPLICATION SIZE<br>(37 CFR 1.16(s))                            | FEE she is \$                             | ets of pap<br>250 (\$125<br>litional 50 | gs exceed 100<br>on size fee due<br>for each<br>n thereof. See<br>CFR 1.16(s). |                  |   |  |                        |    |                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))  |   |   |   |  |                  |   |  |                        | 1  |                       |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2.  |   |   |   |  |                  | • | TOTAL                                      |                        | ]  | TOTAL                 |                        |
| APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |   |   |   |  |                  |   |  | L ENTITY               | OR |                       | ER THAN<br>ALL ENTITY  |
| AMENDMENT  | 03/10/2011  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR                                    | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|  | Total (37 CFR<br>1.16())  | · 20                                      | Minus                                   | ** 20  | = 0              |   | x s =                                      |                        | OR | X \$52=               | 0                      |
|  | Independent<br>(37 CFR 1.16(h))                                 | • 2                                       | Minus                                   | <del></del> 3  | = 0              | 1 | X \$ =                                     |                        | OR | X \$220=              | 0                      |
|  | Application Size Fee (37 CFR 1.16(s))                           |   |   |  |                  |   |  |                        |    |                       |                        |
| Ĺ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |   |  |                  |   |  |                        | OR |                       |                        |
|  |   |   |   |  |                  |   | TOTAL<br>ADD'L<br>FEE                      |                        | OR | TOTAL<br>ADD'L<br>FEE | 0                      |
| (Column 1) (Column 2) (Column 3)   |   |   |   |  |                  |   |  |                        |    |                       |                        |
| AMENDMENT  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN  |   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR                                    | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|  | Total (37 CFR<br>1,15(i))                                       |   | Minus                                   |  |                  | 1 | x s =                                      |                        | OR | x s =                 |                        |
| Δ  | Independent<br>(37 CFR 1 16(h))                                 | *   | Minus                                   | ***  | -                | ] | X \$ =                                     |                        | OR | X \$ =                |                        |
| N<br>L   | Application Size Fee (37 CFR 1.16(s))                           |   |   |  |                  | ] |  |                        | ]  |                       |                        |
| AN   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |   |  |                  |   |  |                        | OR |                       |                        |
|  |   |   |   |  |                  |   |  |                        | OR | TOTAL<br>ADD'L<br>FEE |                        |
| *If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner:  "If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  The Total Ford Independent is some fine of 20 CES 11.6 The independent is some fine of both are partial as benefit by the paids which is no fit and the than 1. SETO to |   |   |   |  |                  |   |  |                        |    |                       |                        |

This collection of information is required by 37 CFR 11.6. The information is required to delian or retain a benefit by the public which is to file (and by the USE) process) an application. Confidentially 39 cycered by 38 cycred by 38 CFR 21.4. This collection is estimated to take 12 nimulates to complete, including gathering, preparing, and submitted the completed application form to the USE 17.0. Time will wary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burdon, should be sent to the CFR Information CFR. U. S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22319-1.8. D.O. NOT 1550, JASP 18.0. D.O.